

Name
in
Full

William Burritt

22
CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

MARYLAND

Died at		Town	County			
Date of death	Month	Day	Years	Months	Days	
190	Sept	13	Age			
Sex	Color or Race			Birth-place		
Occupation			Where Residing if not at place of death			
Married, Single or Widowed	Name of Wife or Husband					
Father's Name	William Burritt			Father's Birthplace	Calvert Co	
Mother's Maiden Name	Rose Elliott			Mother's Birthplace	Calvert Co	
Name of person giving information	John Sundell, Jr.			How related to deceased	Uncle	

CAUSES OF DEATH

PHYSICIAN
OR CORONER

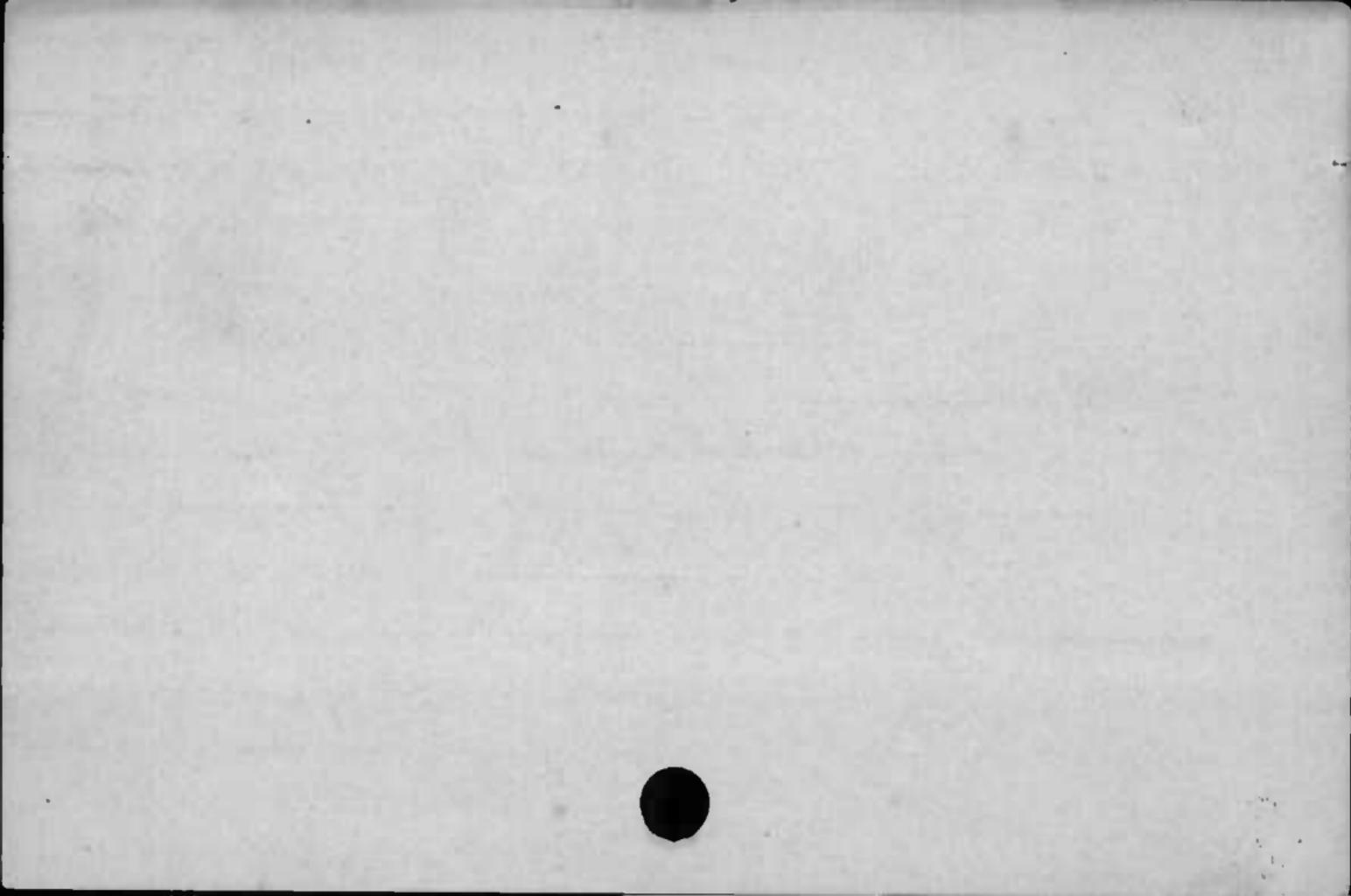
Primary	<u>Myocard</u>	How long
Immediate		How long

Are the name, age, sex, color, date and place correctly given above?

Signature of
Physician

Address

Accident or Suicide?



Edward Dorsey Barnes

20
CERTIFICATE OF DEATH

Died at <u>Bonnie Do</u>		Town <u>Calvert</u>		County <u>Calvert</u>		MARYLAND	
Date of death <u>1906 Sep</u>	Month <u>6</u>	Day <u>3</u>	Age <u>Years</u>	Months <u>11</u>		Days <u>11</u>	
Sex <u>Male</u>	Color or Race <u>White</u>		Birth-place <u>Calvert Co</u>				
Occupation <u> </u>			Where Residing if not at place of death <u> </u>				
Married, Single or Widowed <u> </u>	Name of Wife or Husband <u> </u>						
Father's Name <u>Geo. R. Barnes</u>				Father's Birthplace <u>St. Marys Co</u>			
Mother's Maiden Name <u>Annie Dorsey</u>				Mother's Birthplace <u>Calvert Co</u>			
Name of person giving information <u>Geo. R. Barnes</u>				How related to deceased <u>Father</u>			

CAUSES OF DEATH

Primary

Tuberculosis

How long

4

Immediate

Exhaustion

How long

Are the name, age, sex, color, date and place correctly given above?

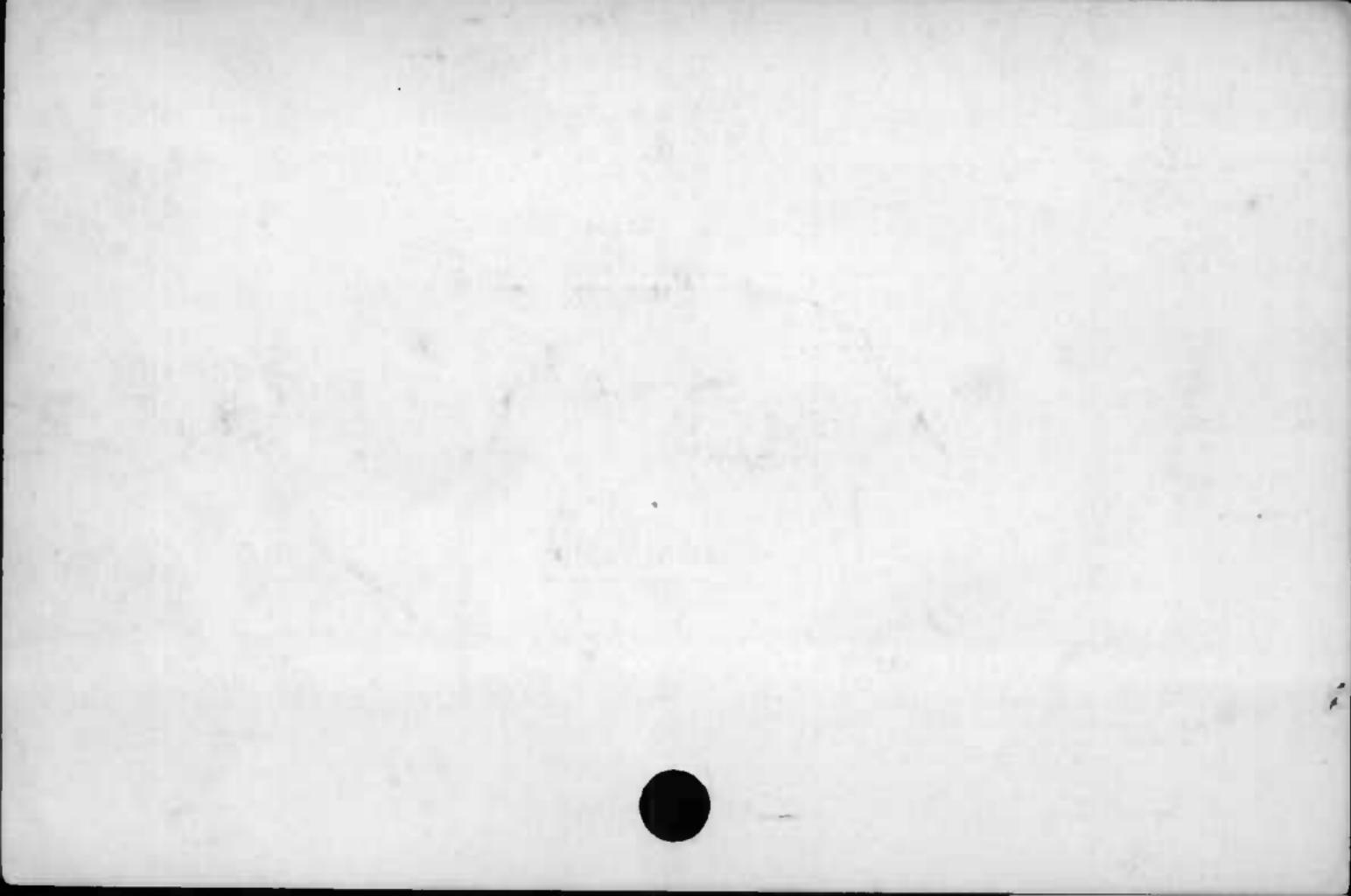
Signature of Physician

Dr. C. Barnes

Address

Mt. Rainier

Accident or Suicide?



Name
in
Full

Mary Ettie Foot

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

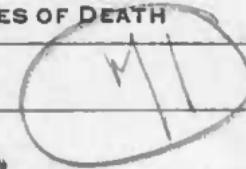
Died at	Olivet		County	Calvert	
Date of death	1906	Month 9	Day 17	Years --	Months 5 weeks 4 Days
Sex	Female	Color or Race	Colored	Birth-place	Calvert Co
Occupation	—		Where Residing if not at place of death	—	
Married, Single or Widowed	Single	Name of Wife or Husband	—	—	
Father's Name	Augustus Foot		Father's Birthplace	Calvert	
Mother's Maiden Name	Mary Etta Lilla Dawson		Mother's Birthplace	Calvert	
Name of person giving information	Mary Brown		How related to deceased	Aunt	

CAUSES OF DEATH

PHYSICIAN
OR CORONER



Primary



How long

From Birth

Immediate

Olivet

How long

Are the name, age, sex, color, date and place correctly given above?

Yes

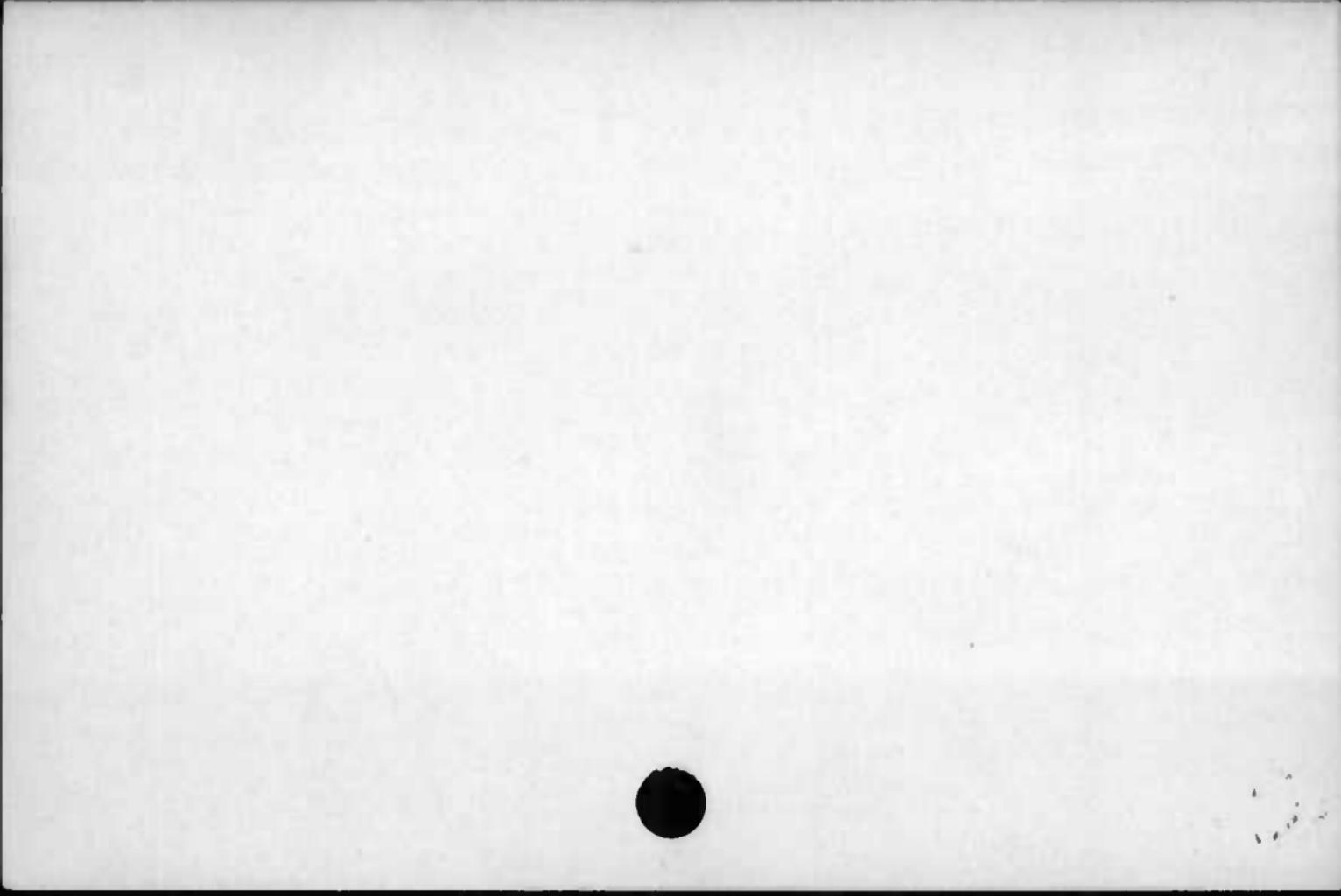
Signature of Physician

S. L. Guckan

Address

Cove Point
Calvert Co Md

Accident or Suicide?



Name
in
Full

Alice Gross

CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND		
Date of death	Month	Day	Years	Months	Days
Sex	Color or Race	Colors &	Birth-place	Baltimore	
Occupation	Where Residing if not at place of death			Locust Co	
Married, Single or Widowed	Name of Wife or Husband				
Father's Name	Alice Gross		Father's Birthplace	Locust Co	
Mother's Maiden Name	Zora Johnson		Mother's Birthplace	Virginia	
Name of person giving Information	Rothwile -		How related to deceased	Uncle	

CAUSES OF DEATH

PHYSICIAN
OR CORONER

1

Primary

Whooping Cough

How long

3 weeks

Immediate

Pneumonia

How long

2 days

Are the name, age, sex, color, date and place correctly given above?

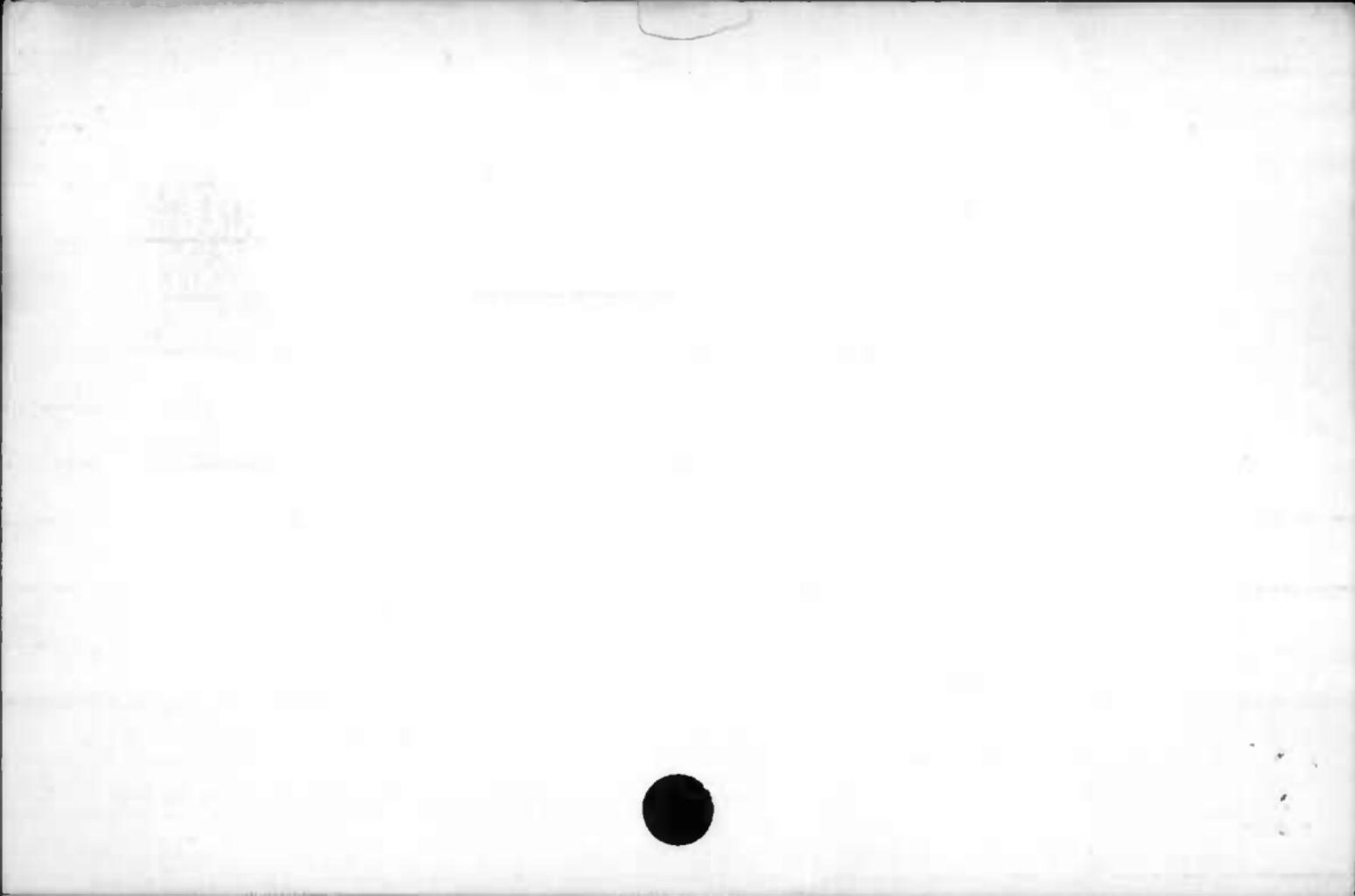
Signature of Physician

Address

J. M. Young

Baltimore Md.

Accident or Suicide?



Name
in
Full

John Wesley Gross

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at Huntingdon		County Calvert		MARYLAND	
Date of death 1906 Sept	Month 2	Day 2	Age 20	Years	Months
Sex male	Color or Race Black	Birth-place Cal. lea.			
Occupation Laborer	Where Residing if not at place of death				
Married, Single or Widowed	Name of Wife or Husband				
Father's Name John Wesley Gross	Father's Birthplace Cal. lea				
Mother's Maiden Name Amelia Gross	Mother's Birthplace Cal. lea				
Name of person giving information James Long	How related to deceased step father				

CAUSES OF DEATH

Primary Pulmonary Tuberculosis How long 1 year

Immediate

Are the name, age, sex, color, date and place correctly given above?

yes

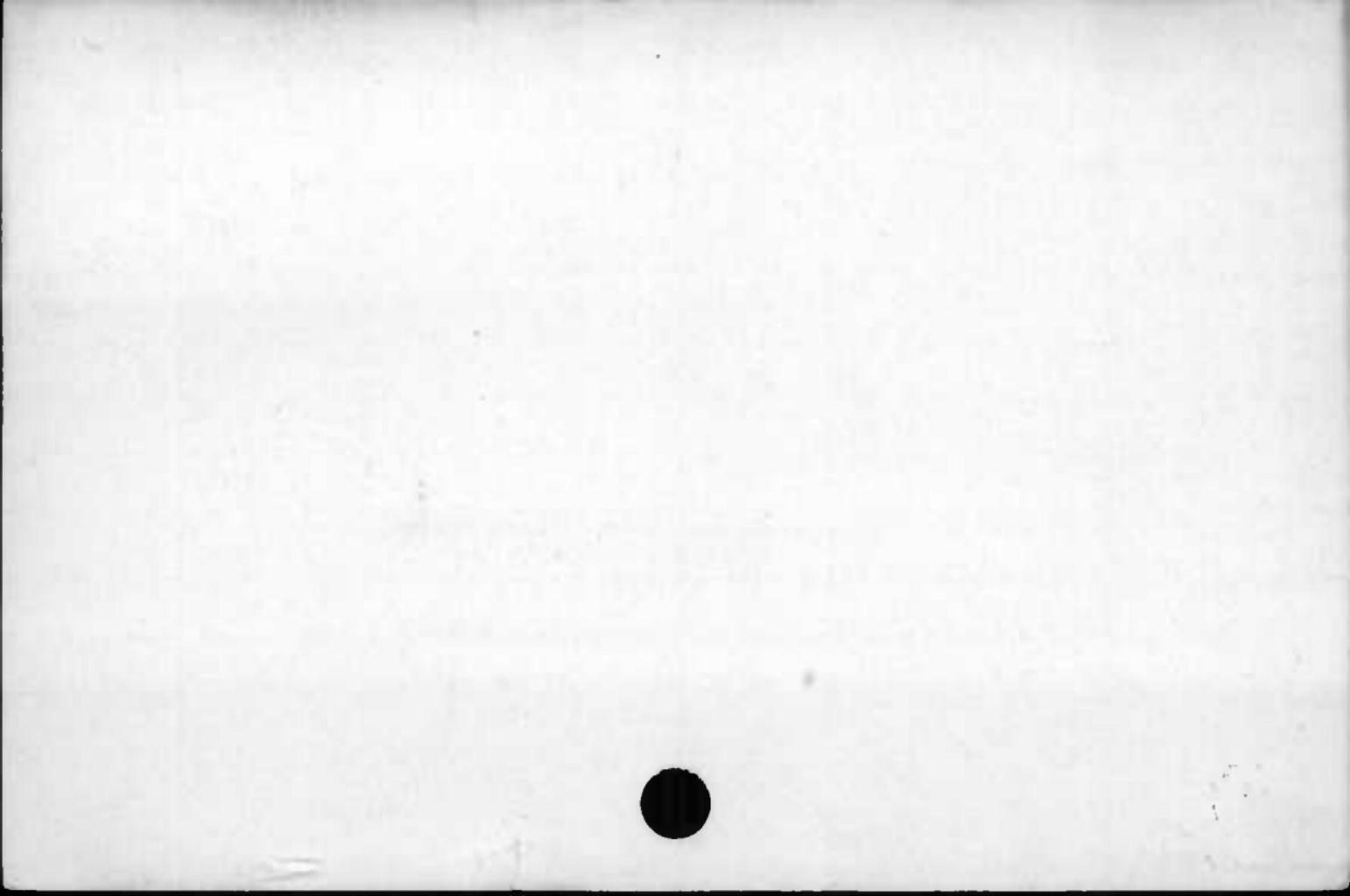
Signature of Physician

Address

J. W. Litch
Huntingdon,
Md.

Accident or Suicide?

PHYSICIAN
OR CORONER



Name
in
Full

Bruce Edward Parram.

CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Died at St Leonard		Town		County		MARYLAND	
Date of death 1906	Month Sept	Day 23	Age	Years	Months	Days	
Sex Male	Color or Race	Edward		Birth-place Calverton			
Occupation			Where Residing if not at place of death				
Married, Single or Widowed		Name of Wife or Husband		Father's Birthplace		Calverton	
Father's Name		Joseph Parram		Mother's Birthplace		Calverton	
Mother's Maiden Name		Elias Janey		How related to deceased		Father	
Name of person giving information		Joseph Parram					

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

Stroke

How long

One hour

Immediate

Are the name, age, sex, color, date and place correctly given above?

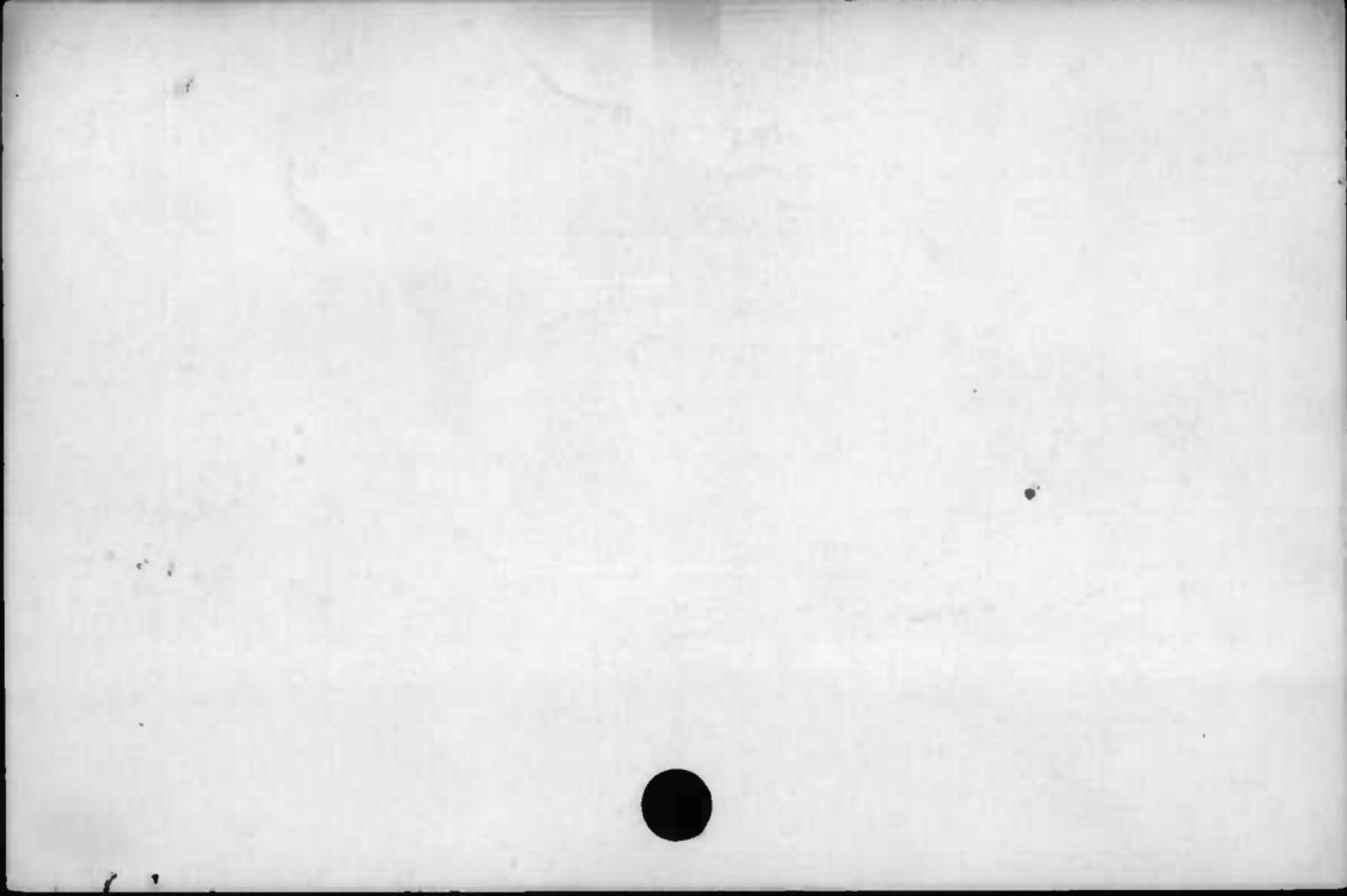
Signature of Physician

Address

101

Accident or Suicide?

D. Brooks & Bros.



Name
in
Full

Bessie May Willious

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND	
Date of death	Month	Day	Years	Months Days
Sex	Color or Race	Age	Birthplace	
Occupation	Where Residing if not at place of death			
Married, Single or Widowed	Name of Wife or Husband		Name of Husband	
Father's Name	Silas Walker		Father's Birthplace	
Mother's Maiden Name	Wilson		Mother's Birthplace	
Name of person giving information	William, Samuel Williams		How related to deceased	

PHYSICIAN
OR CORONER

CAUSES OF DEATH

Primary	Childbirth	(XO)	How long	27 hours
Immediate	Subdolous Heart	(X)	How long	5 minutes
Are the name, age, sex, color, date and place correctly given above?		Yes	Signature of Physician	W. B. Abbott, M.D.
			Address	Clues. Beach

Accident or Suicide?

Addison Chapel
9th Ave